

| | | | | |
|--|---|---|---|----------------------------|
| SERIAL NUMBER | FILING DATE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET NO. |
| 09/417,097 | 10/13/99 | 348 | 2712 | 0819-298 |
| APPLICANT | MASAYUKI MASUYAMA, KYOTO, JAPAN. | | | |
| **CONTINUING DOMESTIC DATA***** VERIFIED LN None | | | | |
| **371 (NAT'L STAGE) DATA***** VERIFIED _____ | | | | |
| **FOREIGN APPLICATIONS***** VERIFIED JAPAN 10-291705 10/14/98 LN Yes | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED 11/03/99 | | | | |
| Foreign Priority claimed 35 USC 119 (a-d) conditions met | | <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY JPX | SHEETS DRAWING 21 |
| Verified and Acknowledged Examiner's Initials LN Initials | | TOTAL CLAIMS 25 | | INDEPENDENT CLAIMS 6 |
| ADDRESS | SEE CUSTOMER NUMBER: 022204 | | | |
| TITLE | AMPLIFYING SOLID-STATE IMAGING DEVICE, AND METHOD FOR DRIVING THE SAME | | | |
| FILING FEE RECEIVED \$1,084 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |